

School-Based Telehealth Workgroup

INFORMATION GATHERING TABLES

Draft Version 3.0

The Maryland Health Care Commission (MHCC) appreciates the contribution made by members of the School-Based Telehealth Workgroup (workgroup). The MHCC is in the *information gathering stage* and seeks workgroup member input to complete the tables on the topic categories below. This information will be used to guide future deliberations by the workgroup. We anticipate completing the tables over multiple meetings with the diverse perspectives of workgroup members.

The items are organized by key categories based on discussions with the workgroup. This document is for information gathering purposes only and should not be considered a comprehensive list of all topic categories of discussion. Certain bullet points identified in the grids are supported by literature while others are aspirational or anecdotal. Those that are literature-based are marked with an asterisk; reference used for these items are included at the end of this document.

Instructions

The top row of each table identifies a topic/concept of discussion. Each table includes three quadrants: benefits, barriers/challenges, and solutions. Each quadrant is subdivided to include persons or entities (e.g., students, MSDE, schools or school districts, grant funds, private payors) that have a role in or may be impacted by the topic/concept of discussion. Other persons and entities may be added by the workgroup during discussions. We ask that workgroup participants list possible benefits, barriers/challenges, and solutions related to the topic/concept. Workgroup participants are not required to complete each quadrant for each table; we ask that participants identify benefits, barriers/challenges and solutions that are most relevant for them and are supported by literature, if possible. If the item is literature-based, please include an end note.

Definitions

Benefit: The value derived from producing or consuming a service

Barrier/Challenge: A circumstance or obstacle (e.g. economic, political, institutional, environment, social, etc.) that hinders or prevents progress, including a difficult task or complex situation that must be overcome in order to implement a solution

Solution: An idea aimed at solving a problem or managing a difficult or complex situation

Key Categories

- Service Delivery/Operations: Providing school-based telehealth¹ services² including implementation, compliance, management and maintenance

Table 1

Implementation of telehealth within schools	
BENEFITS <i>Students</i> <ul style="list-style-type: none"> • Increased access to services, particularly in areas with provider shortages • Decreased absenteeism* • Enhanced health literacy • Improved academic and health outcomes <i>Parents/guardians</i> <ul style="list-style-type: none"> • Expanded access to health and Individualized Education Plan (IEP)³ services for children • Ability for child to be treated at school, reducing time off of work • Reduced travel costs to school/provider • Health equity for caregivers who are unable to provide these services for their children <i>Schools or school districts</i> <ul style="list-style-type: none"> • Addresses provider shortages • Ability to better provide support to students with specialized needs (e.g., IEPs, behavioral health, chronic disease management, etc.) • Increased access to compensatory services or home/hospital services • Minimizes student absenteeism 	BARRIERS & CHALLENGES <i>Students</i> <ul style="list-style-type: none"> • Concerns with potential disruption to the medical home • Confidentiality concerns* • Potential discomfort with seeing a new provider, especially in cases where parent is unable to join visit <i>Parents/guardians</i> <ul style="list-style-type: none"> • Parent desire for child to see their own pediatrician • Confidentiality concerns* • Addressing concerns around the treatment relationship with unknown telehealth providers • Lack of support or enthusiasm for the program* <i>Schools or school districts</i> <ul style="list-style-type: none"> • Beliefs that telehealth is not able to adequately support students* • Cost • Lack of staff support/buy-in
SOLUTIONS <i>Students</i> <ul style="list-style-type: none"> • Provide relevant clinical information to the child's pediatrician regarding the telehealth encounter/intervention • Engage community-based pediatricians to deliver care via telehealth <i>Parents/guardians</i>	

¹ Telehealth, means as it relates to the delivery of health care services, the use of interactive audio, video, or other telecommunications or electronic technology by a licensed health care provider to deliver a health care service within the scope of practice of the health care provider at a location other than the location of the patient. "Telehealth" does not include: (i) an audio-only telephone conversation between a health care provider and a patient; (ii) an electronic mail message between a health care provider and a patient; or (iii) a facsimile transmission between a health care provider and a patient.

² School-based telehealth services include those available to all students, students with IEP, within or outside of a SBHC, including but not limited to non-medical therapeutic services (e.g., mental health counseling, psychoeducational assessments, psychological consultations, etc.) and non-clinical services (e.g. occupational therapy, speech therapy, etc.).

³ The IEP is a written plan that describes the special education and related service support needed for a child with a disability. The IEP defines the type and amount of services needed and where the services will be delivered. School staff is responsible for the implementation of the IEP.

- Build awareness around the potential value in using telehealth services
- Connect the child to their pediatrician for a telehealth encounter

Schools or school districts

- Demonstrate the instances for which outcomes for telehealth services can be the same as an in-person service
- An education ROI model that focuses on student impact of telehealth services
- Create learning community of providers, hospitals, FQHCs, local health departments, etc. to share best practices and best communication strategies
- Grant funds to cover implementation costs, such as training, equipment purchases, upgrades to technical infrastructure, etc.

PARKING LOT

- Online therapies can also include evaluations, re-evaluations, and participation in IEP meetings
- Impact to the larger community
- Industry supports that are available (i.e., ASHA)
- Transfer of service delivery from a person in the school to someone located remotely
- Medical neighborhood (stakeholder)
- Issues of educating the distant site service providers regarding using technology
- Scope of provider practice

Table 2

Building awareness about the value of telehealth services	
BENEFITS <i>Students</i> <ul style="list-style-type: none"> Opportunity to learn about an alternative methods to receive services using technology <i>Parents/guardians</i> <ul style="list-style-type: none"> Aware the services are available to start a conversation about their child receiving these services <i>Schools or school districts</i> <ul style="list-style-type: none"> Opportunity to gain buy-in from school leadership to offer telehealth Obtain information to advocate for bringing services into the school 	BARRIERS & CHALLENGES <i>Students</i> <ul style="list-style-type: none"> Caution from immigrant parents around talking to someone they don't know Appropriately targeting awareness building for self-directive services Potential stigma if technology is only used for IEP/mental health services Messaging about which students are suitable for telehealth and what are the services that are offered for these students <i>Parents/guardians</i> <ul style="list-style-type: none"> Messaging about which students are suitable for telehealth and what are the services that are offered for these students Parent preconceived notions about telehealth services being inferior to in-person Parent linguistic/cultural barriers <i>Schools or school districts</i> <ul style="list-style-type: none"> Competing priorities of leadership and availability to hear about telehealth services Identifying where/who/how/when the awareness building should be targeted Appropriately developing awareness building strategies for all parents/guardians including language, culture, etc. Remaining cognizant of different equity issues across all students including translation issues Access to parents and ability to get the message out to them Messaging about costs
SOLUTIONS <i>Students</i> <ul style="list-style-type: none"> Educate students about the process and benefits of telehealth services, including live demonstrations of the technology Reassure students that telehealth is similar to seeing a provider in-person Provide opportunities to try and test use of new technology Target awareness building to students that are good candidates for telehealth <i>Parents/guardians</i> <ul style="list-style-type: none"> Provide parents information about the benefits of using telehealth to connect their children to the services they need, including live demonstrations of the technology An awareness building strategy that considers parents and guardians across all students of the population <i>Schools or school districts</i> <ul style="list-style-type: none"> Hands-on demonstration of the telehealth technology Providing clear facts to leadership on current challenges and how telehealth services can address these challenges Demonstrate the instances for which outcomes for telehealth services can be the same as an in-person service, including success stories from schools that have successfully implemented telehealth services 	

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- Option to offer culturally and linguistically appropriate services
- Methods to increase awareness to students could include:
 - Demonstrations and videos of exams to increase comfort level of students
 - Peer promotion from telemedicine users
 - Presentations to student groups
 - Focus groups for older students on how to best promote program to parents and other students
- Methods to increase awareness for parents could include:
 - Promoting the benefits through schools' email blasts
 - School principals promoting program in letter to parents, speaking about program at Back to School Nights, PTA meetings, and other parent events.
 - Including enrollment packets in school mailings and making it part of new student registrations
- Cost savings of not having a translator by accessing a service provider that is linguistically appropriate

Table 3

Ensuring the continuum of care/care coordination via telehealth	
BENEFITS <i>Students</i> <ul style="list-style-type: none"> • Increase in coordination between students' PCPs and school healthcare professionals • Potential for an increase in medication adherence, monitoring, and education* <i>Parents/guardians</i> <ul style="list-style-type: none"> • Decrease in time away from work while maintaining continuum of care • Increase in communication between schools and service providers with parents to discuss care management and coordination* • Potential for fewer visits/less duplicity <i>Primary care and specialty care providers</i> <ul style="list-style-type: none"> • Improved ability to successfully treat patients due to an increase in access to patients* <i>Schools or school districts</i> <ul style="list-style-type: none"> • Decreased absenteeism and enhanced overall health of students* • Enhanced continuity of care and communication with school nurse* 	BARRIERS & CHALLENGES <i>Students</i> <ul style="list-style-type: none"> • Consent and HIPAA concerns* • Inability to be seen by to their own provider via telehealth • Lapses in communication between school/remote providers and the child's pediatrician due to technology gaps (i.e., lack of EHR) <i>Parents/guardians</i> <ul style="list-style-type: none"> • Child's pediatrician is not engaging in telehealth services • Concerns around sharing child's information <i>Primary care and specialty care</i> <ul style="list-style-type: none"> • Lack of buy-in or support from providers* • Technical limitations of some community providers (e.g., insufficient internet access, lack of an EHR, etc.). <i>Schools or school districts</i> <ul style="list-style-type: none"> • Lack of buy-in or support from school staff* • HIPAA requirements and obtaining consent to share information*
SOLUTIONS <i>Students</i> <ul style="list-style-type: none"> • Strive to coordinate with local providers • Obtain parental consent to contact the child's pediatrician • Ensure streamlined workflow for information sharing, particularly for providers who lack certain technical capabilities (e.g., EHR) <i>Parents/guardians</i> <ul style="list-style-type: none"> • Inform parents of the benefits to sharing the child's information • Inform parents of the confidentiality requirements around the child's information and the methods used to protect child information <i>Primary care and specialty care</i> <ul style="list-style-type: none"> • Engage the community and secure community support using community wide-meetings and personal visits to crucial stakeholders* • Ensure that the telehealth program is filling a health care gap and not duplicating services* <i>Schools or school districts</i> <ul style="list-style-type: none"> • Ensure that the telehealth program is filling a health care gap and not duplicating services* • Use the beginning of the year/enrollment as a time to obtain consent* • Engage community providers to deliver telehealth services • Develop a process to engage and/or communicate relevant information to the child's pediatrician 	
Parking Lot	

Table 4

Technology (i.e., hardware and software) used in a telehealth encounter	
BENEFITS <i>Schools and Providers</i> <ul style="list-style-type: none"> Increased access to providers to deliver necessary services, while providing quality care* <i>Students</i> <ul style="list-style-type: none"> Technology could be viewed as “cool” <i>Parents/guardians</i> <ul style="list-style-type: none"> Opportunity for increased involvement of parents/guardians in services provided at school through virtual participation (e.g., 3-way conferencing) 	BARRIERS & CHALLENGES <i>Schools and Providers</i> <ul style="list-style-type: none"> Access to broadband connectivity, particularly in rural areas* Access to technicians to address problems with equipment* Training of providers and staff* Level of comfort with the technology* Limited space for telehealth equipment that is both private and secure <i>Students</i> <ul style="list-style-type: none"> Ability to use technology and the potential need for significant oversight/supervision <i>Parents/guardians</i> <ul style="list-style-type: none"> Level of comfort with the technology*
SOLUTIONS <i>Schools and providers</i> <ul style="list-style-type: none"> Hands-on training and demonstrations, including tutorials and practice drills* Provide continual technical support* Research partnerships with local universities, hospitals, health care systems, or telehealth vendors for implementing and maintaining technology* Use mobile hotspots to increase connectivity <i>Students</i> <ul style="list-style-type: none"> Utilize user experience design when developing a solution to support telemedicine* <i>Parents/guardians</i> <ul style="list-style-type: none"> Demonstrations of the technology 	
PARKING LOT	

Table 5

Management and administration of people, processes, and procedures to deliver telehealth services	
BENEFITS <i>State regulation</i> <ul style="list-style-type: none"> Develop program standards for staffing qualifications, training, etc. Develop standards for telehealth technologies and treatment protocols Ability to provide oversight of telehealth services to ensure quality and confidentiality standards are met <i>Schools or school district</i> <ul style="list-style-type: none"> Control resource allocation and distribution across the school district according to measured or perceived needs for telehealth Oversight of individuals delivering telehealth services with standardized protocols <i>Third Party Payers/Medicaid</i> <ul style="list-style-type: none"> Ability to require certain standards be met in order for schools to be reimbursed for telehealth services 	BARRIERS & CHALLENGES <i>State regulation</i> <ul style="list-style-type: none"> “One-size fits all” regulations may not be appropriate solutions for diverse schools and districts Limitations imposed by licensing boards on telehealth service providers <i>Schools or school districts</i> <ul style="list-style-type: none"> Schools with limited resources may have staffing challenges to be able to manage telehealth services Difficulty hiring telehealth services providers Contract management Authority over telehealth service providers who may not be employed by the school <i>Third Party Payers/Medicaid</i> <ul style="list-style-type: none"> Time to develop and implement new processes for reimbursement of telehealth services
SOLUTIONS <i>State regulation</i> <ul style="list-style-type: none"> Flexibility in development and periodic reevaluations of regulations Incorporation of stakeholders in rules development Provide flexibility to schools/school districts to manage the delivery of telehealth services <i>Schools or school districts</i> <ul style="list-style-type: none"> Dedicate funds for telehealth at the district-level to facilitate staff hiring Ensure contracts have clear language around authority governing telehealth services providers (i.e., school vs telehealth service company/health care organization) Establish innovative care delivery models incorporating telehealth with hands-on care <i>Third Party Payers/Medicaid</i> <ul style="list-style-type: none"> Modify Medicaid regulations/policies Expand reimbursement from non-government payers for telehealth services 	
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LITERATURE

1. American Hospital Association. *School-Based Telehealth Program: Dallas Texas*, February 2018. Available at: www.aha.org/system/files/2018-02/childrens-health-school-based-telehealth.pdf
2. EHR Intelligence. *Telemedicine, Remote Care Projects Expand into School Districts*, July 2016. Available at: <https://ehrintelligence.com/news/telemedicine-remote-care-projects-expand-into-school-districts>
3. Burke, B. J., Bynum, A., Hall-Barrow, J., Ott, R., & Albright, M. (2008). *Rural school-based telehealth*, 2008. Available at: <http://journals.sagepub.com/doi/pdf/10.1177/0009922808320597>
4. COMAR 10.09.49.08. More information is available at: <http://www.dsd.state.md.us/comar/comarhtml/10/10.09.49.08.htm>.
5. JAMA Pediatr. *Effect of School-Based Telemedicine Enhanced Asthma Management (SB-TEAM) Program on Asthma Morbidity*, March 2018. Available at: <https://jamanetwork.com/journals/jamapediatrics/article-abstract/2667559>
6. Health and Human Services. *45 CFR Part 160 (A)*. Available at: <https://www.ecfr.gov/cgi-bin/text-idx?SID=58542bd6be129f38e90e0979f4b4d909&mc=true&node=sp45.1.160.a&rgn=div6>;
7. Health and Human Services. *45 CFR Part 164(E)*. Available at: <https://www.ecfr.gov/cgi-bin/text-idx?SID=58542bd6be129f38e90e0979f4b4d909&mc=true&node=sp45.1.164.e&rgn=div6>.
8. Journal of School Nursing. *Telehealth in the school setting: An integrative review*, 2014. Available at: <http://journals.sagepub.com/doi/pdf/10.1177/1059840514540534>
9. Rural Health Information Hub. *Telehealth Use in Rural Healthcare*, August 2017. Available at: <https://www.ruralhealthinfo.org/topics/telehealth#implement>
10. The Children's Partnership. *School-Based Telehealth: An Innovative Approach to Meet the Health Care Needs of California's Children*, October 2009. Available at: http://www.childrenspartnership.org/wp-content/uploads/2016/06/School-Based-Telehealth%E2%80%94An-Innovative-Approach-to-Meet-the-Health-Care-Needs-of-Californias-Children_October-2009.pdf
11. Advance Telehealth. *Three Main Barriers to Telemedicine Implementation*, August 2017. Available at: <https://www.advanced-telehealth.com/main-barriers-telemedicine/>
12. HealthTech. *Telehealth Plays a Key Role in Improving Urban Pediatric, Neonatal Care*, February 2018. Available at: <https://healthtechmagazine.net/article/2018/02/telehealth-plays-key-role-improving-urban-pediatric-neonatal-care>
13. mHealth Intelligence. (2017, June 30). *Telehealth Supporters Lobby DC for Better Broadband Connectivity*, June 2017. Available at: <https://mhealthintelligence.com/news/telehealth-supporters-lobby-dc-for-better-broadband-connectivity>